

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2016	

Full Name of Payee <b>American Marketing &amp; Publishing</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 7380 Sprout Springs Rd Ste 210-248		Amount 1250.00	
City Flowery Branch	State GA	Zip Code 30542	Transaction ID : SE.6288
Purpose of Expenditure Door Hangers	Category/ Type 006	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		4891.00	

Full Name of Payee <b>American Marketing &amp; Publishing</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 7380 Sprout Springs Rd Ste 210-248		Amount 1145.00	
City Flowery Branch	State GA	Zip Code 30542	Transaction ID : SE.6426
Purpose of Expenditure Door Hangers	Category/ Type 006	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Name of Federal Candidate H DOUGLAS OWENS		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		6036.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2395.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan

[Electronically Filed]

Date

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09 / 20 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
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		M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2016	

Full Name of Payee <b>HWS Headway Work Force Solutions</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 421 Fayetteville St #1020		Amount 1620.50	
City Raleigh	State NC	Zip Code 27601	Transaction ID : SE.6279
Purpose of Expenditure Canvasser payroll 8/22-8/31		Category/ Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		1620.50	

Full Name of Payee <b>HWS Headway Work Force Solutions</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 421 Fayetteville St #1020		Amount 1620.50	
City Raleigh	State NC	Zip Code 27601	Transaction ID : SE.6282
Purpose of Expenditure Canvasser payroll 8/22-8/31		Category/ Type 002	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016
Name of Federal Candidate H DOUGLAS OWENS		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		3241.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3241.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee <b>HWS Headway Work Force Solutions</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 421 Fayetteville St #1020		Amount 200.00	
City Raleigh	State NC	Zip Code 27601	Transaction ID : SE.6284
Purpose of Expenditure Canvasser Mileage 8/22-8/31		Category/ Type 006	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		3441.00	

Full Name of Payee <b>HWS Headway Work Force Solutions</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 421 Fayetteville St #1020		Amount 200.00	
City Raleigh	State NC	Zip Code 27601	Transaction ID : SE.6286
Purpose of Expenditure Canvasser Mileage 8/22-8/31		Category/ Type 006	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2016
Name of Federal Candidate H DOUGLAS OWENS		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		3641.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	400.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	6036.00

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